PTO/SB/21 (6-98)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Application Number 09/289, 789

Filling Date April 9, 1999

First Named Inventor ALAN T. RUBERG

Group Art Unit 2755

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	*	Examiner Name	TBA
Total Number of Pages in This Subm	nissior 15	Attorney Docket Numb	er 83000.1100/P3835
	ENCLOS	SURES (check all that a	oply)
Fee Transmittal Form		nent Papers Application)	After Allowance Communication to Group
Fee Attached	Drawing	ı(s)	Appeal Communication to Board of Appeals and Interferences
Amendment / Response	Licensin	ng-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
After Final		Routing Slip (PTO/SB/69) companying Petition	Proprietary Information
Affidavits/declaration(s)		to Convert to a mal Application	Status Letter
Extension of Time Request		of Attorney, Revocation of Correspondence	Additional Enclosure(s) (please identify below)
Express Abandonment Request	Termina	al Disclaimer	Check for \$426.00; Return receipt postcard
Information Disclosure Statemen	1 Z I	it for Refund	C 27
Certified Copy of Priority Document(s)	Remarks		00
Response to Missing Parts/ Incomplete Application		-	Ā
Response to Missing Parts under 37 CFR 1.52 or 1.53			00 MAIL ROO
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Firm The Hecker by Gary A. H	aw Group	/	<b>验</b> 证书
Signature		-	
Date May 31, 2000			
	CERTIFIC	ATE OF MAILING	
I hereby certify that this correspondence envelope addressed to: Assistant Com	ce is being depo missioner for Pa	sited with the United State Itents, Washington, D.C. 2	s Postal Service <u>as first class mail in an</u> 0231 on this date5/31/2000
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May 31, 2000

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TOTAL AMOUNT OF PAYMENT

(\$) 426.00	(\$)	426	.00
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Complete if Known			
Application Number	09/289,789		
Filing Date	April 9, 1999		
First Named Inventor	ALAN T. RUBERG		
Examiner Name	TBA		
Group / Art Unit	2755		
Attorney Docket No.	83000.1100/P3835		

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit	3. ADDITIONAL FEES Large Entity Small Entity Fee	ald		
Account Number	Code (\$) Code (\$)   105 130 205 65   Surcharge - late filling fee or oath	$\neg$		
Deposit Account	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.			
Name	139 130 139 130 Non-English specification			
Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,520 For filing a request for reexamination			
	112 920° 112 920° Requesting publication of SIR prior to Examiner action			
2. Payment Enclosed:  Check Order Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	<u>يَا رَد</u>		
FEE CALCULATION	115 110 215 55 Extension for reply within first month			
1. BASIC FILING FEE	- 1	- o		
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101 690 201 345 Utility filing fee	128 1,850 228 925 Extension for reply within mar month.			
106 310 206 155 Design filing fee	Filtre a baladia assessed at a second	<del>2</del>		
107 480 207 240 Plant filing fee	1 120 300 220 130 Barrant taranta	_		
108 690 208 345 Reissue filing fee	Detition to legitude a public use proceeding	_		
114 150 214 75 Provisional filing fee	Detition to revise unavoidable	<b></b>		
SUBTOTAL (1) (\$)	140 110 240 55 Petition to revive - unintentional			
2. EXTRA CLAIM FEES	142 1,210 242 605 Utility issue fee (or reissue)			
Fee from	442 420 245 Design lesue fee	$\dashv$		
Extra Claims below Fee Pato  Total Claims 35 -20** = 15 X 18 = 270.00	144 580 244 290 Plant issue fee	$\dashv$		
Independent 5 - 3** = 2 X 78 = 156.00	122 130 122 130 Petitions to the Commissioner			
Multiple Dependent	123 50 123 50 Petitions related to provisional applications			
**or number previously paid, if greater; For Reissues, see below	w 126 240 126 240 Submission of Information Disclosure Stmt			
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	$\dashv$		
103 18 203 9 Claims in excess of 20	146 690 246 345 Filing a submission after final rejection	$\dashv$		
102 78 202 39 Independent claims in excess of 3				
104 260 204 130 Multiple dependent claim, if not paid				
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)			
SUBTOTAL (2) (S) 426.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)			
SUBMITTED BY Complete (If applicable)				
Name (Print/Type) Gary A. Heckey	Registration No. (Attorney/Agent) 31,023 Telephone 310-286-0377	,		

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